



south dakota
DEPARTMENT OF EDUCATION
Learning. Leadership. Service.



H1N1 Action Plan

Overview

Planning for H1N1 this fall

Seasonal flu is a given any fall or winter. The 2009-10 flu season will have an element of uncertainty with the arrival of the H1N1 virus last spring. The good news is that, to date, most of the people who have become ill with novel H1N1 in the United States have not become seriously ill and have recovered without hospitalization. The bad news is that everything related to H1N1 flu is subject to change.

This booklet is designed to help South Dakota school districts navigate the waters of a potential flu outbreak. It is not intended to replace your existing emergency plans.

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Essential Contacts

South Dakota Department of Education, (605) 773-3134

- Kari Senger, Coordinated School Health, kari.senger@state.sd.us
- Mary Stadick Smith, Communications Director, mary.stadicksmith@state.sd.us
- www.doe.sd.gov/oess/schoolhealth/H1N1flu.asp

South Dakota Department of Health, 1-800-592-1861 (in state)

- SDDOH Absenteeism Data Collection -- Department of Health, (605) 773-3737
- SDDOH Web site: www.doh.sd.gov/H1N1.aspx

Centers for Disease Control and Prevention

- www.cdc.gov/h1n1flu/schools (specific for schools)
- www.cdc.gov/h1n1flu/ (general information)

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Guidelines

The following are guidelines for schools to consider as they prepare for and face an outbreak of H1N1 flu in their communities. Schools should consult their own existing emergency, or preparedness plans, as well.

1) Preparedness Phase

- Create or review your pandemic influenza plan; it may be part of the school's existing emergency plan.
- Determine staff roles and responsibilities in the event of school closure due to pandemic flu outbreak. (*See sample of Essential Response Team from Sioux Falls School District's Pandemic Flu Action Plan – page 10*)
- Coordinate efforts with local health officials and emergency preparedness officials.
- Educate students and staff about the importance of common-sense hygiene:
 - Cover nose and mouth with tissue when coughing or sneezing (or cough/sneeze into sleeve)
 - Wash hands frequently with soap and water
 - Use hand sanitizer if soap and water not available (*See sample posters – pages 8-9*)
- Provide time and facilities for students to wash hands as necessary throughout the school day.
- Be vigilant about routinely cleaning commonly touched surfaces (eg. doorknobs, keyboards).
- Develop a policy regarding exclusion for flu-like symptoms; follow guidelines from Centers for Disease Control and Prevention. (*See Sample Policy Regarding Exclusion for Flu – page 12*)
- Share prevention messages and exclusion policy with parents at beginning of school year. Consider your communication vehicles: written letters, e-mails, electronic alert systems and/or the school's Web site. (*See Sample Parent Letter: Preparedness Phase – page 11*)
- Ensure that standard disease recognition procedures are in place. Offer staff training if necessary.
- Be thinking now about alternative learning strategies (eg. Virtual School, local cable station).
- Host a vaccination clinic at your school. REMINDER: There will likely be two vaccines this fall: one for seasonal flu and one for H1N1. Contact your local community health official to coordinate a vaccination clinic. A list of Community Health Service contacts is available on the Department of Health's Web site at <http://doh.sd.gov/LocalOffices/CHS.aspx>
- Begin submitting weekly absenteeism data to the Department of Health at www.doh.sd.gov.

2) Flu Outbreak Phase

--Follow current guidelines from the Centers for Disease Control and Prevention regarding exclusion and school dismissal.

NOTE: CDC guidelines are subject to change, depending on the timing and severity of a flu outbreak.

--**CDC guidelines** (as of Aug. 7, 2009)

- Current CDC guidelines advise that **students or staff who exhibit flu-like symptoms** (fever with a cough or sore throat) **should stay home for at least 24 hours after they are free of fever without the use of fever-reducing medication.**
- In general, **CDS does not recommend school dismissal unless there is a magnitude of student or staff absenteeism** that interferes with the school's ability to function.

REMINDER: Guidelines are subject to change.

Stay informed by visiting the CDC's Web site at:

- <http://www.cdc.gov/h1n1flu/schools> (specific for schools)
- <http://www.cdc.gov/h1n1flu/> (general H1N1 information)

--Once flu hits your district, communicate with parents and the public regarding the situation. Be honest and focus on the facts as well as prevention messages. Remember to protect the privacy of any affected students and staff and their families.

--Communicate with the South Dakota Department of Education, which will serve as liaison between local districts and the Department of Health. Key staff people: Kari Senger and Mary Stadick Smith, (605) 773-3134.

--Consider exclusion options and/or alternate education plans for high-risk students (eg., students with asthma, diabetes, other chronic illnesses)

--Isolate students with flu-like symptoms as they are waiting to be sent home. CDC recommends that they wear a surgical mask, if possible, and that those who care for ill students wear protective gear as well.

--Continue submitting weekly absenteeism data to the Department of Health.

3) Outbreak Worsens

--Follow current guidelines from the Centers for Disease Control and Prevention regarding exclusion and school dismissal.

NOTE: CDC guidelines are subject to change, depending on the timing and severity of a flu outbreak.

--Consider if the following steps are in order:

- Rearrange classroom seating to minimize exposure to airborne germs (eg. avoid seating students face to face when possible)
- Limit extracurricular activities, field trips, etc.

- Rotate teachers between classrooms, rather than students
- See CDC guidance for more

--Communicate with parents and the public regarding the situation.

--If an outbreak reaches a critical mass and absenteeism interferes with everyday schooling, consider social distancing and school closure strategies.

--Ultimately, **the decision to implement social distancing or to close a school lies with the local district.** When making these decisions, local districts should strongly consider:

- Current CDC guidelines
- Numbers of students and staff who are ill
- Input of local health care providers

NOTE: The South Dakota Department of Education stands ready to provide districts with the most up-to-date information available, in order to help districts make informed decisions. Contact Kari Senger or Mary Stadick Smith at the South Dakota Department of Education (605) 773-3134 with questions.

--If school closure is to occur, alert parents and the public in a timely manner and be sure to cancel extracurricular activities as well.

-- If school closure is to occur, report it to the CDC via the form available at www.cdc.gov/h1n1flu/schools/. Click on "Report K-12 School Dismissals" (The South Dakota Department of Education will automatically receive a copy of this form.)

--If closure will be for an extended period of time, make plans to adjust the school calendar to make up these days.

--Continue submitting weekly absenteeism data to the Department of Health.

4) After an Outbreak

--Continue to communicate with parents and the public regarding the situation.

--Continue to monitor the situation.

--Continue to submit weekly absenteeism data to the Department of Health.

--If school closure did occur, consider process for reopening, including possible screening for symptoms on return to school.

Frequently Asked Questions

Q: What should schools be doing to prepare for the 2009-10 flu season?

A: In preparation for the upcoming flu season, schools should be reviewing their existing emergency plans and determining staff roles and responsibilities in the event of an outbreak. They can also be in contact with local community health officials to talk about hosting a vaccination clinic as that time approaches. The school-age population is likely to be one of the target populations for an H1N1 flu vaccine.

Once the school year begins, school leaders should be alert to students exhibiting influenza-like illness.

Q: What are the symptoms of H1N1, and when do we ask kids to stay home?

A: Symptoms of H1N1 include a fever (100° F or more) with a cough or sore throat. Students or staff exhibiting flu symptoms should stay home from school for at least 24 hours after they are free of fever without the use of fever-reducing medication. (NOTE: These are current recommendations from the Centers for Disease Control and are subject to change, depending on the timing and severity of a flu outbreak.)

At the start of the year, school leaders should communicate the following messages with parents:

- 1) Keep students home if they exhibit flu-like symptoms (follow current CDC guidelines regarding timeframe, etc.)
- 2) Look for opportunities to get your child vaccinated
- 3) Teach your children common-sense hygiene practices (eg., washing hands often, covering coughs and sneezes)
- 4) Have a backup plan for child care should your child become ill and have to stay home from school

Q: What happens if there is a confirmed case of H1N1 in my district?

A: Assuming that you are already excluding students and staff who show flu-like symptoms (fever of 100° F or more with sore throat or cough), you really don't need to do anything differently. There is no need to report H1N1 cases directly to the Department of Health. However, you should continue to report weekly absenteeism data. With the expected number of H1N1 cases this fall, the South Dakota Department of Health will not be alerting school districts to individual cases within their boundaries.

Q: What's the protocol for school closure?

A: Closing school is a local decision. The South Dakota Department of Education stands ready to provide districts with the most up-to-date information available, in order to help districts make informed decisions. Some of the factors to consider include the following:

- 1) CDC guidelines regarding school closure
- 2) Numbers of students and staff who are ill
- 3) Input of local health care providers

NOTE: In general, school closure is not advised unless there is a magnitude of faculty or student absenteeism that interferes with the school's ability to function. This CDC recommendation is subject to change based on ongoing surveillance and continuous risk assessment.

Q: Why were schools recommended to close for one case of H1N1 last spring, and now (fall 2009), the recommendation has changed significantly?

A: In the spring of 2009, a novel influenza virus -- one that previously has not been seen in humans -- was discovered. Very little was known about H1N1 at that time, including the severity of illness it might cause. Therefore, schools were recommended to close to slow the spread of the virus and protect school-age children from exposure to H1N1. Several months have passed, giving scientists an opportunity to study and observe this virus. H1N1 is well-established in communities across the United States and internationally. At this point, H1N1 is expected to cause mild to moderate illness; however, persons at high risk* for complications due to influenza are at greatest risk for complications.

*High risk: Children less than 5 years old; persons aged 50 years or older; children and adolescents (age 6 months to 18 years) who are receiving long-term aspirin therapy and who might be at risk for experiencing Reye syndrome after influenza virus infection; pregnant women; adults and children who have chronic pulmonary, cardiovascular, hepatic, hematological, neurologic, neuromuscular, or metabolic disorders; adults and children who have immunosuppression (including immunosuppression caused by medications or by HIV); residents of nursing homes and other chronic-care facilities.

Q: What can schools do to help mitigate the situation?

A: Schools can help to prevent transmission of H1N1 by making it clear that students and staff who exhibit flu-like symptoms (fever of 100° F or more with cough or sore throat) should stay home. (Follow current CDC guidelines regarding timeframe, etc.) Schools can get involved in hosting vaccination clinics when that time arrives. Schools can participate in absenteeism surveillance to assist health leaders in gaining a better understanding of H1N1.

Q: Is there an H1N1 vaccine?

A: It is expected that there will be a vaccine specifically for H1N1 available later this fall. This vaccine would be a separate shot from the seasonal flu shot. It is also possible that the new H1N1 vaccine will involve two doses - meaning an individual will need to get two shots for H1N1 immunity.

Q: Should we call this H1N1 flu or swine flu?

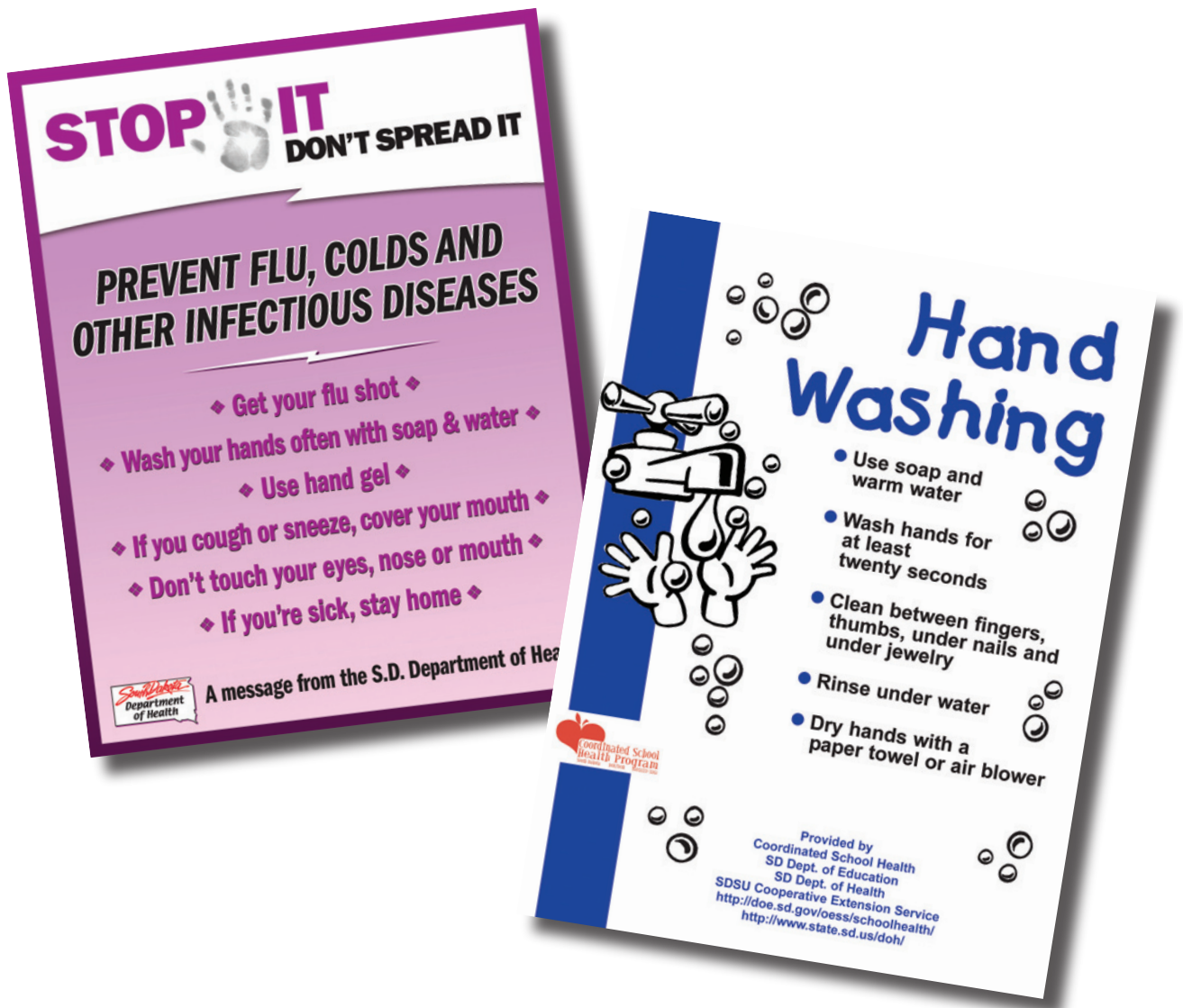
A: H1N1 is the name of this particular strain of influenza. Influenza strains often originate with animals and get transmitted to humans. At this point in the progression of this strain, though, transmission appears to be entirely from human to human. Although it appears to have originated with pigs, then to have passed to humans working around pigs, the virus has combined with components of other types of influenza, including avian and human strains of the virus, to create this particular strain that appears to be easily passed from human to human, which is a concern. The H1N1 virus is not transmitted by food. You cannot get this influenza from eating pork or pork products. Eating properly handled and cooked pork and pork products is safe.

Q: Should special attention be made to cleaning our schools in light of H1N1?

A: School leaders should always uphold a high standard of cleanliness in their school buildings. At this time, appropriate messages of carefully washing one's hands and covering one's mouth when coughing or sneezing, should be conveyed often to students. Schools should continue to clean frequently touched surfaces using standard products according to directions on the product label.

Sample Documents

- Hygiene Posters
- Sioux Falls School District Pandemic Flu Action Plan
- Sample Parent Letter: Preparedness Phase
- Sample Policy: Exclusion for Flu
- School District Pandemic Influenza Planning Checklist



Posters available to download at
<http://doh.sd.gov/H1N1.aspx>

Hand Washing

How to wash...

- Use soap & warm water
- Wash hands vigorously for at least 20 seconds
- Be sure to clean between fingers, under fingernails & under jewelry
- Rinse hands under warm water again to remove remaining soap
- Dry hands well with a paper towel or air blower
- Use a paper towel to turn off faucet






When to wash...

- After arriving to a destination
- After working or playing outdoors
- After coughing, sneezing or blowing your nose
- Before preparing or eating food & meals
- After using the restroom
- After working or playing with animals
- When you or others are ill
- When hands are visibly dirty


Provided by Coordinated School Health & the
SD Departments of Health & Education
<http://doe.sd.gov/oess/schoolhealth/>
<http://www.state.sd.us/doh/>

Stop the spread of germs that make you and others sick!

Cover your Cough



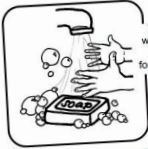
Cover your mouth and nose with a tissue when you cough or sneeze or cough or sneeze into your upper sleeve, not your hands.




Put your used tissue in the waste basket.

Clean your Hands



after coughing or sneezing.



Wash hands with soap and warm water for 20 seconds



or clean with alcohol-based hand cleaner.

Did you wash?

- Wet your hands with warm water & soap.
- Scrub your hands for at least 20 seconds (about the time it takes to sing Happy Birthday).
- Be sure to clean between your fingers & under your nails.
- Rinse your hands with warm water.
- Dry your hands with paper towels or an air dryer.
- Use paper towels to turn off the faucet.



Provided by Coordinated School Health & the
SD Departments of Health & Education
<http://doe.sd.gov/oess/schoolhealth/>
<http://www.state.sd.us/doh/>

Sioux Falls School District Pandemic Flu Action Plan Essential Response Team

Department	Essential Staff	Work Location	Duties
Superintendent	Dr. Pam Homan*	IPC/Home	Response Team
Community Relations	Community Relations Supv. Communications Specialist	Home Home	Communications/Media
Finance	Todd Vik* Comptroller Exec. Asst., Finance Payroll Specialist Bookkeeper	IPC/Home On-call IPC IPC On-call	Response Team Finance Issues Process Bills/Mail Process Payroll Bookkeeping
Human Resource	Dr. Fred Aderhold* Clerical, Benefits	IPC/Home Home	Response Team Benefit Calls
Instructional Support Services	Dr. Bill Smith*	IPC/Home	Response Team
Special Services	Deb Wilson* Clerical, Related Services	IPC/Home IPC	Response Team Process Bills
ATI	Bob Jensen* Network Manager Programmer Analyst/ Financial Systems Web Systems Manager	IPC/Home On-call On-call On-call	Response Team Network Systems Finance Systems Web Systems
Operational Services	Jeff Kreiter* Plant Maintenance Supv.	IPC/Home IPC/Home	Response Team Buildings/Grounds

1. School Board meetings will be held via Live Office Teleconferencing. The public will be given a conference call phone number and identification number to listen to the calls. (Point person: Bob Jensen).
2. All building key cards will be deactivated except for the Response Leadership Team members' cards. (Point person: Jeff Kreiter).
3. All phone lines will be directed to a singular voice mail message. (Point person: Bob Jensen).
4. Payroll will be paid during the closing.
5. All on-site work at IPC and Central Services will be completed in staggered shifts to maximize social distancing.
6. Essential staff members and reactivated staff members other than the Response Leadership Team will be paid Pandemic Duty Pay when requested to work on-site.
7. Essential staff members, reactivated staff members and the Response Leadership Team will be paid Hazardous Duty Pay when requested to work at an Emergency Operations Command Clinic located at a District site.
8. Pandemic Duty Pay shall be the employee's hourly wage multiplied by 2.
9. Hazardous Duty Pay shall be the employee's hourly wage multiplied by 4.
10. UPS, Fed EX and other delivery companies will be notified by the Business Manager to discontinue deliveries during the closing.
11. The Response Leadership Team shall determine what, who, and when other staff members are reactivated during the closing.
12. Upon notification that schools can reopen, staff will reconvene for a specified period of time prior to students returning so that adequate instructional and procedural planning can be completed.

Sample Parent Letter: Preparedness Phase

(Date)

Dear Parent:

With the approach of winter, we also face the approach of another flu season. Last spring, a new influenza A virus, called H1N1, was discovered.

While we don't know what this upcoming flu season will bring, we do want to be prepared as best we can. To that end, we are asking families to follow these simple strategies for helping to prevent the spread of H1N1 and other flu viruses.

--If your child has flu-like symptoms – fever of 100° or more with a cough or sore throat – **keep him or her home for at least 24 hours after the child is free of fever without the use of fever-reducing medicine.** Please note: This recommendation from the Centers for Disease Control and Prevention; **could change based on the severity of a potential flu wave.**

--Look for opportunities to **get your child immunized** for H1N1 flu, in addition to seasonal flu.

--Help your child stay healthy by making sure he gets enough sleep, eats well and stays hydrated.

--Teach your child to **wash her hands often.** Washing with soap and warm water for at least 20 seconds is ideal (that's about as long as it takes to sing the "Happy Birthday" song twice).

--Teach your children the proper use of hand sanitizer. Gels, rubs and hand wipes all work well, as long as they contain at least 60 percent alcohol. Hand washing is preferable, but sanitizer will work in the absence of soap and water.

--Teach your children to keep their hands away from their face and avoid touching their mouth, nose or eyes.

--Teach your children to **cover coughs and sneezes with tissues** or by coughing into the inside of their elbow. Cough or sneeze into your sleeve—not your hands.

--**Have a backup plan for child care** should your child contract H1N1 and he or she has to stay home from school.

To get updated information regarding the H1N1 flu, we would recommend the following Web sites:

South Dakota Department of Health: www.doh.sd.gov/H1N1.aspx

The Centers for Disease Control and Prevention: www.cdc.gov/h1n1flu/

Thank you for your cooperation in keeping our children and schools healthy!

Sincerely,

Superintendent's Name

Sample Policy: Exclusion for Flu

In an effort to prevent the spread of influenza, students or staff who exhibit flu-like symptoms (fever of 100° or more with a cough or sore throat) should stay home for at least 24 hours after they are free of fever without the use of fever-reducing medications. The . . . School District intends to send students who exhibit these symptoms home.

This policy is based on recommendations from the Centers for Disease Control and Prevention; it is subject to change based on the timing and severity of the 2009-10 flu season.

Department of Health and Human Services School District Pandemic Influenza Planning Checklist

SCHOOL DISTRICT (K-12) PANDEMIC INFLUENZA PLANNING CHECKLIST

Local educational agencies (LEAs) play an integral role in protecting the health and safety of their district's staff, students and their families. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed the following checklist to assist LEAs in developing and/or improving plans to prepare for and respond to an influenza pandemic.

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency plans recommended for school districts by the U.S. Department of Education (Practical Information on Crisis Planning: A Guide For Schools and Communities <http://www.ed.gov/admins/lead/safety/emergencyplan/crisisplanning.pdf>).

Further information on pandemic influenza can be found at www.pandemicflu.gov.

1. Planning and Coordination:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify the authority responsible for declaring a public health emergency at the state and local levels and for officially activating the district's pandemic influenza response plan.

Checklist available
to download at:
www.pandemicflu.gov/plan/pdf/schoolchecklist.pdf

1. Planning and Coordination:

Completed In Progress Started

- ☐ ☐ ☐ Identify the authority responsible for declaring a public health emergency at the state and local levels and for officially activating the district's pandemic influenza response plan.
- ☐ ☐ ☐ Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation, quarantine, movement restriction, healthcare services, emergency care, and mutual aid.
- ☐ ☐ ☐ As part of the district's crisis management plan, address pandemic influenza preparedness, involving all relevant stakeholders in the district (e.g., lead emergency response agency, district administrators, local public health representatives, school health and mental health professionals, teachers, food services director, and parent representatives). This committee is accountable for articulating strategic priorities and overseeing the development of the district's operational pandemic plan.
- ☐ ☐ ☐ Work with local and/or state health departments and other community partners to establish organizational structures, such as the Incident Command System, to manage the execution of the district's pandemic flu plan. An Incident Command System, or ICS, is a standardized organization structure that establishes a line of authority and common terminology and procedures to be followed in response to an incident.
- ☐ ☐ ☐ Ensure compatibility between the district's established ICS and the local/state health department's and state education department's ICS.
- ☐ ☐ ☐ Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Assure that the plan includes timelines, deliverables, and performance measures.
- ☐ ☐ ☐ Work with your local and/or state health department and state education agencies to coordinate with their pandemic plans. Assure that pandemic planning is coordinated with the community's pandemic

1. Planning and Coordination (cont.):		
Completed	In Progress	Not Started
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Consider developing in concert with the local health department a surveillance system that would alert the local health department to a substantial increase in absenteeism among students.

Implement an exercise/drill to test your pandemic plan and revise it periodically.

Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts.

1. Planning and Coordination (cont.):

Completed In Progress Started

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Test the linkages between the district's Incident Command System and the local/state health department's and state education department's Incident Command System. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contribute to the local health department's operational plan for surge capacity of healthcare and other services to meet the needs of the community (e.g., schools designated as contingency hospitals, schools feeding vulnerable populations, community utilizing LEA's healthcare and mental health staff). In an affected community, at least two pandemic disease waves (about 6-8 weeks each) are likely over several months. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Incorporate into the pandemic influenza plan the requirements of students with special needs (e.g., low income students who rely on the school food service for daily meals), those in special facilities (e.g., juvenile justice facilities) as well as those who do not speak English as their first language. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Participate in exercises of the community's pandemic plan. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Work with the local health department to address provision of psychosocial support services for the staff, students and their families during and after a pandemic. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Consider developing in concert with the local health department a surveillance system that would alert the local health department to a substantial increase in absenteeism among students. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Implement an exercise/drill to test your pandemic plan and revise it periodically. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts. Students and their families during and after a pandemic. |

2. Continuity of Student Learning and Core Operations:

Completed In Progress Started

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Develop scenarios describing the potential impact of a pandemic on student learning (e.g., student and staff absences), school closings, and extracurricular activities based on having various levels of illness among students and staff. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Develop alternative procedures to assure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television |

4. Communications Planning (cont.):		
Completed	In Progress	Not Started
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, and local radio or TV stations) for communicating pandemic status and actions to school district staff, students, and families.

Develop and maintain up-to-date communications contacts of key public health and education stakeholders and use the network to provide regular updates as the influenza pandemic unfolds.

Assure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.

Advise district staff, students and families where to find up-to-date and reliable pandemic information from federal, state and local public health sources.

Disseminate information about the LEA's pandemic influenza preparedness and response plan (e.g., continuity of instruction, community containment measures).

3. Infection Control Policies and Procedures:

Completed In Progress Started

- ☐ ☐ ☐ Work with the local health department to implement effective infection prevention policies and procedures that help limit the spread of influenza at schools in the district (e.g. promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a habit now in order to help protect children from many infectious diseases such as flu.
- ☐ ☐ ☐ Provide sufficient and accessible infection prevention supplies, such as soap, alcohol-based/waterless hand hygiene products (containing at least 60% alcohol), tissues, and receptacles for their disposal.
- ☐ ☐ ☐ Establish policies and procedures for students and staff sick leave absences unique to a pandemic influenza (e.g., non-punitive, liberal leave).
- ☐ ☐ ☐ Establish sick leave policies for staff and students suspected to be ill or who become ill at school. Staff and students with known or suspected pandemic influenza should not remain at school and should return only after their symptoms resolve and they are physically ready to return to school.
- ☐ ☐ ☐ Establish policies for transporting ill students.
- ☐ ☐ ☐ Assure that the LEA pandemic plan for school-based health facilities conforms to those recommended for health care settings (Refer to www.hhs.gov/pandemicflu/plan).

3. Communications Planning:

Completed In Progress Started

- ☐ ☐ ☐ Assess readiness to meet communication needs in preparation for an influenza pandemic, including regular review, testing, and updating of communication plans.
- ☐ ☐ ☐ Develop a dissemination plan for communication with staff, students, and families, including lead spokespersons and links to other communication networks.

Checklist available to download at: www.pandemicflu.gov/plan/pdf/schoolschecklist.pdf



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